

F-067
DEC 16 2005**OFFICIAL*****CARDINAL LAW GROUP***

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Date: DECEMBER 16, 2005

To: EXAMINER WARE, CICELY Q.
U.S. PATENT AND TRADEMARK OFFICE

Fax #: (571) 273-8300

From: FRANK C. NICHOLAS
Phone #: (847) 424-2521

Client/Matter No.: CR00302M (9640/87)

of Pages: 15
(including cover sheet)

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Attorney Docket No	CR00302M (9640/87)
Application Number	10/048,444
Filing Date	OCTOBER 19, 2001
First Named Inventor	VINAYAK TRIPATHI, ET AL
Group Art Unit	2634
Examiner	WARE, CICELY Q.

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Response to Ex Parte Quayle Office Action Mailed on December 13, 2005 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
	<input checked="" type="checkbox"/> Drawings: Replacement Sheet 1	<input type="checkbox"/> Notice of Appeal (Appeal Notice, Brief, Reply Brief)
	<input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Proprietary Information
	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Postcard
	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
	<input type="checkbox"/> Declaration	<input type="checkbox"/>
	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/>
	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/>
	<input type="checkbox"/> Request of Refund	<input type="checkbox"/>
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.	<input type="checkbox"/>
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.138(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed.	<input type="checkbox"/>	

CALCULATION OF FEE

	Claims After Amendment	Highest No Previously Paid For	Present Extra	Small Entity	Large Entity
Total	Minus			Rate	Add'l Fee
Indep	Minus			x \$25=	0
First Presentation of Multiple Dep. Claim				x \$100=	0
				+\$180=	---
				total add'l fee	\$ 0
				total add'l fee	\$ 0

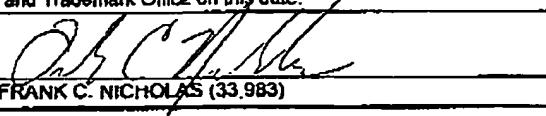
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
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Signature		Date: DECEMBER 16, 2005
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CERTIFICATE OF FACSIMILE

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FRANK C. NICHOLAS (33,983)

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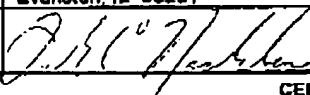
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	CR00302M (9640/87)
	Application Number	10/046,444
	Filing Date	OCTOBER 19, 2001
	First Named Inventor	VINAYAK TRIPATHI, ET AL
	Group Art. Unit	2634
	Examiner	WARE, CICELY Q.

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Response to Ex Parte Quayle Office Action Mailed on December 13, 2005	<input type="checkbox"/> Assignment Papers
<input type="checkbox"/> After Final	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawings: Replacement Sheet 1
<input type="checkbox"/> Status Letter	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Two Month Extension of Time Request (duplic)	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> To Convert a Provisional Application
<input type="checkbox"/> Supplemental Information Disclosure Statement, PTO-1449	<input type="checkbox"/> Declaration
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Small Entity Statement
	<input type="checkbox"/> Request of Refund
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed
	<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 50-1713. A duplicate copy of this sheet is enclosed

CALCULATION OF FEE

Small Entity					Large Entity			
	Claims After Amendment		Highest No Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus			x \$25=	0	x \$50=	
Indep		Minus			x \$100=	0	x \$200=	
First Presentation of Multiple Dep. Claim					+ \$180=	—	+ \$360=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

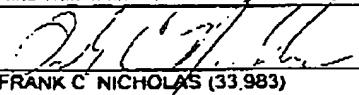
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature			

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FRANK C. NICHOLAS (33,983)		Date DECEMBER 16, 2005	

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FRANK C NICHOLAS (33.983)

Name of applicant, assignee or registered representative

Signature

December 16, 2005

Date of Signature

Amendment

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	TRIPATHI ET AL.	EXAMINER:	WARE
SERIAL NO.:	10/046,444	GROUP:	2634
FILED:	10/19/2001	CASE NO.:	CR00302M
TITLED:	ADAPTIVE TURBO DECISION FEEDBACK EQUALIZATION METHOD AND DEVICE		

Motorola, Inc.
Corporate Offices
1303 E. Algonquin Road
Schaumburg, IL 60196
September 1, 2005

Response To Ex Parte Quaely Office Action Mailed December 13, 2005

MS Amendment
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants hereby respectfully submit the following response: